24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
CLUB FOR GROWTH ACTION	C C00487470		
	M M / D D / Y Y Y Y		
Check if 24-hour report 48-hour report New report Amends report fi			
Full Name of Payee Club for Growth	Date of Public Distribution/Dissemination		
	05 28 2014		
Mailing Address 2001 L St., NW, Ste. 600	Amount		
City State Zip Code	81.79		
Washington DC 20036	Transaction ID : SE.45321 Date of Disbursement or Obligation		
Purpose of Expenditure mail production costs (from advance line 21) Category/ Type	Date of Disbursement of Congation M		
Name of Federal Candidate Support Of	ffice Sought: House District: 00		
THAD COCHRAN Oppose	President Senate State: MS		
	isbursement For:		
Full Name of Payee	Date of Public Distribution/Dissemination		
Club for Growth	05 28 2014		
Mailing Address 2001 L St., NW, Ste. 600	Amount		
City State Zip Code	81.79		
Washington DC 20036	Transaction ID : SE.45322 Date of Disbursement or Obligation		
Purpose of Expenditure mail production costs (from advance line 21) Category/ Type	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	ffice Sought: House District: 00		
CHRIS MCDANIEL Oppose	President Senate State: MS		
Calendar Year-To-Date Per Election for Office Sought Di 2227079.25	isbursement For: Primary General 014 Other (specify)		
(2) CURTOTAL of Nomined Independent Funanditures	400.50		
(a) SUBTOTAL of Itemized Independent Expenditures	163.58		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eignarty committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·		
Chris Chocola [Electronically Filed] Date	05 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	ENT EXILID	ITOTILO		PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER ▼
CLUB FOR GROWTH ACTION			C	C00487470
Check if 24-hour report 48-hour report	X New rep	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee Jamestown Associates			Date of P	ublic Distribution/Dissemination
Mailing Address 5 Maple Road			Amount	20 2014
Ste. 300				
City Princeton	State NJ	Zip Code 08540		3709.50 on ID : SE.45317
Purpose of Expenditure mail production costs		Category/ Type	Date of D	bisbursement or Obligation / 27 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
THAD COCHRAN		X Oppose	President	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	22	214748.13	Disbursement Fo	or:
Full Name of Payee Jamestown Associates			M	
Mailing Address 5 Maple Road			05 Amount	28 2014
Ste. 300			Amount	
City Princeton	State NJ	Zip Code 08540	Transactio	3709.50 on ID : SE.45318
Purpose of Expenditure mail production costs		Category/	Date of D	Disbursement or Obligation 27 2014
		Туре		
Name of Federal Candidate CHRIS MCDANIEL		Support Oppose	Office Sought:	House District: 00 Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		2218457.63	Disbursement Fo	
	, ,		Other	(specify)
(a) SUBTOTAL of Itemized Independent Expendent	litures		•	7419.00
(b) SUBTOTAL of Unitemized Independent Expe	enditures		·	7 1 7 1 7 1
(c) TOTAL Independent Expenditures			•	7 1 7 1 7 1
Under penalty of perjury I certify that the indepwith, or at the request or suggestion of, any car party committee) any political party committee or	didate or authorized			
Chris Chocola Signature	[Electron	ically Filed] Date		29 / 2014
g				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	I LXI LND	ITOTILO		PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
CLUB FOR GROWTH ACTION				C C00487470
Check if 24-hour report 48-hour report	New rep	ort Amends repo		M / D = D / Y = Y = Y
Full Name of Payee Thomas Graphics, Inc.			М	of Public Distribution/Dissemination
Mailing Address 9501 North I.H. 35			Amour	05 28 2014 nt
City	State	Zip Code		4188.75
Austin	TX 78753			action ID : SE.45319 of Disbursement or Obligation
Purpose of Expenditure mail production costs, postage		Category/ Type		05 / D D / Y Y Y Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sought	t: House District:00
THAD COCHRAN		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	, 22	222646.38	Disbursement 2014 Ot	t For:
Full Name of Payee			Date of	of Public Distribution/Dissemination
Thomas Graphics, Inc.			M	05 28 2014
Mailing Address 9501 North I.H. 35			Amou	nt
City	State	Zip Code	— IT:	4188.75
Austin	TX	78753		ction ID : SE.45320 of Disbursement or Obligation
Purpose of Expenditure mail production costs, postage		Category/ Type		05 / D D / Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sough	t: House District: 00
CHRIS MCDANIEL		Oppose	Preside	ent Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	, , ,	2226835.13	Disbursement 2014 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditure	es			8377.50
				7 7
(b) SUBTOTAL of Unitemized Independent Expendi	tures		•	77 77 77
(c) TOTAL Independent Expenditures			•	15960.08
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Chris Chocola Signature	[Electron	ically Filed] Date	9 05 /	29 / 2014
Signataro				